

## **APPLICATION DATA SHEET**

### **APPLICATION INFORMATION**

Application Type:: Regular  
Subject Matter:: Utility  
Title:: LOCKING MECHANISM FOR A BONE SCREW  
Attorney Docket Number:: HOE-593.1  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 6  
Small Entity?: No  
Petition Included?: No

### **APPLICANT INFORMATION**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status:: Full Capacity  
Given Name:: Jens  
Family Name:: Beger  
City of Residence:: Tuttlingen  
Country of Residence:: Germany  
Street of Mailing Address:: Schlehenhweg 7  
City of Mailing Address:: Tuttlingen  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: D-78532  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status:: Full Capacity  
Given Name:: Rudolf

Family Name:: Zepf  
City of Residence:: Wurmlingen  
Country of Residence:: Germany  
Street of Mailing Address:: Roemerweg 21  
City of Mailing Address:: Wurmlingen  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: D-78573  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status:: Full Capacity  
Given Name:: Rudolf  
Family Name:: Beisse  
City of Residence:: Murnau  
Country of Residence:: Germany  
Street of Mailing Address:: BG Unfallklinik Murnau, Prof. -Kuentscher-Strasse 8  
City of Mailing Address:: Murnau  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: D-82418  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status:: Full Capacity  
Given Name:: Michael  
Family Name:: Potulski  
City of Residence:: Murnau  
Country of Residence:: Germany  
Street of Mailing Address:: BG Unfallklinik Murnau, Prof. -Kuentscher-Strasse 8  
City of Mailing Address:: Murnau  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: D-82418

**CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 20028  
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**REPRESENTATIVE INFORMATION**

Representative Customer Number::	20028	
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**DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	divisional of	10/038,376	01/03/02
10/038,376	An application claiming the benefit under 35 USC 119 (e)	60/262,968	01/19/01

**ASSIGNEE INFORMATION**

Assignee Name:: AESCULAP AG & Co. KG  
Street of Mailing Address:: Am Aesculap-Platz  
City of Mailing Address:: Tuttlingen  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: D-78532